### **Operational SPIN Change Instructions**

The SLD permits Operational SPIN changes when the applicant certifies that:

- The SPIN change is allowed under its state and local procurement rules;
- The SPIN change is allowable under the terms of the contract with the original service provider; and
- The applicant has notified its original service provider of its intent to change service providers.

Operational SPIN changes cannot be made prior to receiving a Funding Commitment Decision Letter (FCDL).

Operational SPIN change requests must be in writing. The following information must be provided on district letterhead and signed:

- Submitter of Request
- Billed Entity Number
- Funding Request Number (FRN)
- Form 471 Application Number
- Applicant Name
- Applicant Contact
- Applicant Address
- Applicant Phone
- Applicant E-Mail Address
- Applicant Fax #
- Original SPIN
- Original Service Provider
- Original Service Provider Contact
- Original Service Provider Phone
- Original Service Provider E-Mail Address
- New SPIN
- New Service Provider
- New Service Provider Contact
- New Service Provider Phone
- New Service Provider E-Mail Address
- Has the original service provider supplied any services under this funding request? If yes, you must supply the following information.

# o Recurring Services

- Monthly Pre-Discount Amount for original service provider
- Monthly Pre-Discount Amount for new service provider
- Effective Date of Change (must be first day of month)
- Last Day of Service for new service provider

## • Non-Recurring Services

- o One-Time Pre-Discount Amount for original service provider
- o One-Time Pre-Discount Amount for new service provider
- o Effective Date of Change (must be first day of month)
- Last Day of Service for new service provider

The request may be sent via mail or fax.

Address:
Operational SPIN Change
Schools and Libraries Division
Box 125 – Correspondence Unit

80 S. Jefferson Road Whippany, NJ 07981

#### FAX:

Attention: Operational SPIN Change 973-599-6526

For further information, go to the SLD's web site at: http://www.sl.universalservice.org/reference/OperationalSpin.asp

Sample Template on Next Page

## OPERATIONAL SPIN CHANGE REQUEST

Date:		
Contact Name:		

Billed Entity Number:

Address:

Phone Number: E-mail Address: Fax Number:

District Name:

Form 471 Application Number:

Funding Request Number:

Original SPIN:

Original Service Provider:

Original Service Provider Contact:

Original Service Provider Phone:

Original Service Provider E-Mail Address:

New SPIN:

New Service Provider:

New Service Provider Contact:

New Service Provider Phone:

New Service Provider E-Mail Address:

Has the original service provider supplied any services under this funding request? If yes, you must supply the following information.

### • Recurring Services

- o Monthly Pre-Discount Amount for original service provider
- o Monthly Pre-Discount Amount for new service provider
- o Effective Date of Change (must be first day of month)
- Last Day of Service for new service provider

# • Non-Recurring Services

- o One-Time Pre-Discount Amount for original service provider
- o One-Time Pre-Discount Amount for new service provider
- o Effective Date of Change (must be first day of month)
- o Last Day of Service for new service provider

Certification by applicant that this SPIN change request satisfies the requirement that:

- ➤ the SPIN change is allowed under State and Local Procurement Rules;
- ➤ the SPIN change is allowable under the terms of the contract between the applicant and its original service provider;
- > the applicant has notified its original service provider of its intent to change service providers

Please send confirmation that this SPIN change has been executed to me at the E-Mail address listed above.

Signature

Mail this signed form to:
Operational SPIN Change Request
Schools and Libraries Division
Box 125, Correspondence Unit
80 South Jefferson Road
Whippany, NJ 07981

OR

Fax to: Attention: Operational SPIN Change 973-599-6526